FORM PTO-1083

MAR 0 6 2006

Attorney Docket No. 81863,0022

ED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Takehisa HIGA, et al.

Serial No:

10/706,323

Confirmation No.:

6485

Filed:

November 12, 2003

For:

INK JET RECORDING HEAD STRUCTURE, INK JET

PRINTER, POWDER MOLDING METHOD, METHOD

OF MANUFACTURING...

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Art Unit:

2853

Examiner: Rachel S. Dicht

> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

March 2, 2006 Date of Deposit

Diane Zynn

Signature

03/02/06 Date

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

Enclosed are Annotated and Replacement Sheets for Figures Figs 7(a) – 10(c)

The fee has been calculated as shown below:

| TOTAL CLAIMS FEE | (Col. 1) CLAIMS REMAINING AFTER AMENDMENT | | (Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | | (Col. 3) PRESENT EXTRA* | LG/SM \$ ENTITY FEE | | ADD'L FEE DUE | |
|--|---|---|---|-----|-------------------------------|------------------------|---------|------------------|---|
| | 5 | - | 20 | ** | 0 | LG=\$50 SM=\$25 | \$[FEE] | \$ | 0 |
| INDEPENDENT CLAIMS FEE | 1 | - | 3 | *** | 0 | LG=\$200 SM=\$100 | \$(FEE) | \$ | 0 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS LARGE ENTITY FEE = \$290 SMALL ENTITY FEE = \$145 | | | | | | | \$ | 0 | |
| Independent Claims: 1 TOTAL | | | | | | | | \$ | 0 |

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.
- Please charge the fee of \$__ for the additional claim fees to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- 冈 Please charge the fee of \$ 120 for the extension of time to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- X The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
 - M Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17

Dated: March 2, 2006

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Respectfully submitted, OGXIN & HARTSON L

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Attorney for Applicant(s)